

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 7999

First Inventor or Application Identifier deLong et al

Title Compositions and methods for treating hair loss with oximyl- and hydroxylamino- prostaglandins

Express Mail Label No. EF 182966002 US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, D.C. 202311. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)2. ☐ Applicant claims small entity status
(see 37 CFR §1.27)3. ☒ Specification Total Pages [85]
(preferred arrangement set forth below)

- Descriptive Title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☐ Drawing(s) (35 USC §113) Total Sheets ☐

5. Oath or Declaration Total pages [2]

- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR §1.63(d))
(for continuation/divisional with Box 17 complete)

i. ☐ DELETION OF INVENTORS

Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR §1.767. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Listing (if applicable, all necessary)

- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ Paper
- c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- 9. ☐ Assignment Papers (cover sheet & document(s))
- 10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
- 11. ☐ English Translation Document (if applicable)
- 12. ☒ Information Disclosure ☒ Copies of IDS
Statement (IDS)/PTO-1449 Citations
- 13. ☐ Preliminary Amendment
- 14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
- 15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- 16. ☐ Other:

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in the preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. 1

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

NAME	Catherine U. Brown				
	The Procter & Gamble Company				
ADDRESS	Miami Valley Laboratories				
	P. O. Box 538707				
CITY	Cincinnati	STATE	Ohio	ZIP CODE	45253-8707
COUNTRY	US	TELEPHONE	513-627-1637	FAX	513-627-0260

Name (Print/Type)	Catherine U. Brown	Registration No. (Attorney/Agent)	44,565
Signature	<i>Catherine U. Brown</i>	Date	31-Jan-2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

+

 01/31/01
 09/77/556
 J003 US PTO

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

Complete if Known

Application Number Not assigned

Filing Date 1/31/2001

First Named Inventor DeLong

Examiner Name Not assigned

Group/Art Unit Not assigned

Attorney Docket No. 7999

TOTAL AMOUNT OF PAYMENT (\$) 1588.00**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter & Gamble Company

- ☒
- Charge Any Additional Fee
- ☐
- Applicant claims small entity
-
- Required Under 37 C.F.R. §§1.16 and 1.17 status. See 37 CFR §127

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	[710.00]
106	320	206	160	Design filing fee	[]
107	490	207	245	Plant filing fee	[]
108	710	208	355	Reissue filing fee	[]
114	150	214	75	Provisional filing fee	[]
SUBTOTAL (1)					(\$)[710.00]

2. EXTRA CLAIM FEES

Fee From
Extra Claims Below Fee Paid

Total Claims [51] - 20** = [31] x [18] = [558]
Independent Claims [4] - 3** = [1] x [80] = [80]
Multiple Dependent [] = []

** or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)[638]**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	[]
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	[]
139	130	139	130	Non-English specification	[]
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	[]
112	920*	112	920*	Requesting publication of SIR prior to Examiner's action	[]
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner's action	[]
115	110	215	55	Extension for reply within 1 st month	[]
116	390	216	195	Extension for reply within 2 nd month	[]
117	890	217	445	Extension for reply within 3 rd month	[]
118	1,390	218	695	Extension for reply within 4 th month	[]
128	1,890	228	945	Extension for reply within 5 th month	[]
119	310	219	155	Notice of Appeal	[]
120	310	220	155	Filing a brief in support of an appeal	[]
121	270	221	135	Request for oral hearing	[]
138	1,510	138	1,510	Petition to institute a public use proceeding	[]
140	110	240	55	Petition to revive - unavoidable	[]
141	1,240	241	620	Petition to revive - unintentional	[]
142	1,240	242	620	Utility issue fee (or reissue)	[]
143	440	243	220	Design issue fee	[]
144	600	244	300	Plant issue fee	[]
122	130	122	130	Petitions to the Commissioner	[]
123	50	123	50	Petitions related to provisional applications	[]
126	240	126	240	Submission of IDS	[240]
581	40	581	40	Recording each patent assignment per property (times number of properties)	[]
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	[]
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	[]
179	710	279	355	Request for Continued Examination (RCE)	[]
169	710	249	355	Request for expedited examination of a design application	[]

Other fee (specify) _____

Other fee (specify) _____

* Reduced by Basic Filing Fee Paid **SUBTOTAL(3) (\$)** [240]**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)

Catherine U. Brown

Registration No.
(Attorney/Agent)

44,565

Telephone

(513) 627-1637

Signature



Date

31-Jan-2001

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231.